

Teenage Golf League

Registration/Player Assessment Form

* This completed form, along with payment, must be submitted for entry into the Teenage Golf League.

Name _____

Age: _____
(Must be age 13-19 as of 6/10/2010)

Date of birth: _____

Address: _____

E-Mail: _____

Phone: Home: _____ Cell: _____

In case of emergency please call: _____

Phone _____

Golf course you usually play: _____

Average 18 Hole Score: _____

Best 18 Hole Score: _____

Average # of times you plan to play golf each week this summer: _____

Average # of times you plan to practice each week this summer: _____

On an 18 hole basis, please list the amount of strokes you would like to improve
your score this summer _____

I have read and understand the Teenage Golf League "Rules & Information" sheet.

(Signed by player)

Please mail or deliver entry form, along with \$50 in cash or check, to:
Soldiers Field GC • Teenage Golf League • P.O. Box 9035 • Rochester, MN 55903